



ADF Health Services

Provider Information Pack

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Bupa Health Services Pty Ltd (Bupa)

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About Bupa's Registered Provider Network

Bupa is currently servicing a 6-year Australian Government contract to deliver quality health care for Australian Defence Force (ADF) members. In partnership with sub-contractors, we manage a range of health services for eligible ADF personnel, with the ultimate purpose of helping them remain fit and healthy for active duty - both in Australia and overseas.

Bupa's ADF Health Services Contract (ADFHSC) delivers on-site health services to Defence bases around Australia through the provision of more than 1,500 clinicians, as well as through a national network of registered community-based providers consisting of Allied Health, Medical Specialists and hospitals. There are currently over 16,000 registered providers in the network which cover more than 50 different specialised services required by Defence.

We also have a network of Pathology, Imaging and Radiology and Optical partners that our Providers are expected to use for on-referrals.

We're proud to support the ADF. As part of our Provider network – you'll be helping us deliver essential health services to over 85,000 Defence Eligible Personnel (EPs) across Australia.



“Healthcare for Defence members is often unique and time critical. We need the very best specialists to provide care and treatment for patients, as well as manage outcomes involving many unknowns, remote locations and remote access to medical care.

Being an ADF provider is a commitment to putting care and advice towards not only a patient goal, but a collective ADF capability. You'll be helping the men and women of our forces serve their country and safely fulfil their dreams in active military service.”

Dr Ben Grant

Senior Contracted Clinician – Stirling Health Centre (WA)

How the partnership works

ADF members serve to protect our community every day. Whether it's at home supporting us through bushfires and natural disasters or abroad protecting the nation and providing humanitarian care – healthcare plays a critical role in supporting the important work they do on the frontline.

Our registered Providers work in partnership with Bupa and the referring clinicians across Defence Health Centres to provide a managed, end-to-end healthcare service for members. When the need for a specialist referral is required by a Defence facility clinician, an online request is sent to Bupa to manage the episode of care. Bupa then works with its registered Provider Network to book an appointment and manage the referral – taking account of the urgency of the request, location of the serving member and the required specialty or service.

Identification and treatment of health issues amongst ADF members is a key priority area for Defence. Unique occupational risks, coupled with the need to provide a duty of care to all members, requires specific requirements around risk assessment, disclosure and management.

Communication between external Providers and Defence Health Centres and the timely submission of clinical reports is integral in ensuring coordinated care.



“Providers play a critical role in keeping ADF members ready for active duty. This involves all aspects of routine general practice and care as well as regular physical assessments. There is a strong focus on occupational medicine and rehabilitation from injury, with Providers called on to prepare large numbers of defence personnel for deployment at short notice. Collaboration and communication are essential in achieving positive outcomes for our members.”

Dr Anita Toth

Senior Contracted Clinician – Robertson Barracks Health Centre (Darwin)

Things you need to know

Provider conditions

To ensure compliance with Defence requirements and to provide consistent high-quality care to Eligible Personnel (EPs), healthcare professionals working within the Provider Network are required to meet and maintain all registration, accreditation and insurance standards. In addition, we require you to:

- hold full and unconditional registration with the Australian Health Practitioner Regulation Agency (AHPRA) or your relevant governing body
- invoice only for approved services that you or your Provider delivers to an EP in accordance with the relevant [Schedule of Fees](#) and Medicare rules
- ensure the [Terms and Conditions](#) of your Provider Agreement are extended to any person you engage (by employment or contract, not by on-referral) to provide clinical care or treatment to an EP.

Our intelligent Referral and Booking System (iRBS)

Bupa's intelligent Referral and Booking system (iRBS) is an online automated system that supports Providers in servicing Eligible Personnel (EP). All registered Providers are expected to use iRBS.

The system assists with:

- appointment management and access to the Referral Form
- online submission of clinical reports to the referring clinician
- invoicing and payment for approved services
- providing a safe and secure method for transferring sensitive documents such as referrals and clinical reports.

At the time of an initial consultation, Providers are authorised to provide the services requested on the referral form. Bupa Providers are expected to use iRBS for the timely submission of clinical reports and invoices. For instructions on using iRBS, see the [iRBS How to Guide](#).

Clinical Reports

Preparation of the Clinical Report is considered part of the episode of care and cannot be billed for separately. Clinical Reports should communicate to the referring clinician matters that are relevant to the ongoing care of the EP, including outlining any requests for Restricted Services that may be recommended. *Note that Restricted Services require Defence approval prior to proceeding.*

After each appointment, Medical Specialists must prepare a Clinical Report and submit it through iRBS. For Allied Health providers, a Clinical Report is required after the initial consultation, each series of six consults and the final consultation.

Clinical Reports are to be addressed to the referring Health Practitioner and are to be submitted within five business days of your consult. If iRBS is unavailable, Providers may post the report directly to the referring Health Facility (as detailed in the referral).

If a treatment plan or hospital admission is warranted for your proposed care, this should be included in your Clinical Report. Progress against this plan should be advised in subsequent Clinical Reports.

On-referrals for Pathology, Optical, Imaging and Radiology

Additional services that would attract an MBS rebate and are clinically required in the treatment of the referred condition do not require additional Defence approval. Any on-referral should be recorded in your Clinical Report to ensure the referring clinician is advised.

Registered Providers are expected to use Bupa's network for Pathology, Imaging and Radiology and Optical on-referrals. Using our provider network ensures reports can be securely received in a timely fashion via iRBS. [Find our preferred Providers here](#)

Restricted Services

If a Provider is recommending or proposing Restricted Services for an EP, they must seek further Defence approval and direction from the referring Health Practitioner. Details of the Restricted Service should be included in the EP clinical report for approval by the referring Health Practitioner at the Defence health facility.

Section 9.5 of the [Provider Terms and Conditions](#) outlines the list of Restricted Services and the information that must be provided in the clinical report for Defence approval.

Please note that Defence will rarely approve payment for treatment or services that are not able to be rebated under Medicare.

Example:

Although NIPT is commonly desired during pregnancy, it is not able to be claimed through Medicare and is not Defence funded. Should this test be desired by an EP, the individual will be required to pay for the testing themselves and the provider will need to obtain informed financial consent.

Providing urgent and emergency care

In emergency or clinically urgent circumstances, appropriate treatment should not be impeded by the requirement to gain additional Defence approval. It is expected that all reasonable efforts will be made to obtain approval or direction from the referring clinician by phone. In emergency situations, Bupa should be notified as soon as is practical by phoning 1800 IMSICK (1800 467425).

Incident notification

Incidents are defined as when an EP in your care becoming seriously ill, discharges themselves from care against medical advice or refuses medical care that may result in death or serious injury. Should this occur or if you have any concerns, you must notify Defence / Bupa – via the referring clinician or Health Centre noted on the referral, or on 1800 IMSICK (1800 467425) as soon as it is practicable to do so.

For reporting general incidents (such as a slip or fall or other minor injuries that occur whilst an EP is attending an appointment), please complete this online [Incident Notification Form](#) or contact the Bupa Customer Care Team on 1800 316 915.

Prescribing medications

With the exception of emergency supply or short course medication (such as analgesia following discharge from hospital after surgical procedures), please ensure that EPs are aware that Defence expects all prescriptions to be filled at pharmacies located within Defence health facilities. In addition:

- only prescribe the minimum quantity of medication required to cover the period until the EP returns to the Defence health facility for review
- manufacturer samples that are not routinely available to EPs, must not be provided without Defence approval*.

** If prescribing outside of current TGA/PBS rules, Defence approval is required and a rationale for use of non-TGA/non-PBS medications should be included in correspondence – including clinical evidence of the requested treatment in similar medical conditions. Defence approval is not generally required for supply of PBS listed medications for PBS acceptable conditions.*

Charging members for services

EPs (or third parties) are not to be charged for any Defence requested services under the Provider Agreement. During a referral however, an EP may seek and pay for non-approved services (such as cosmetic surgery) privately or through alternate third party funding arrangements. Where this occurs, you are required to:

- obtain informed financial consent from the EP
- seek the EPs consent to advise the referring clinician in writing of the request. (This will enable the EP to assess their eligibility for leave and to be counselled regarding potential career implications)
- include the request in the Clinical Report for the referral – where EP consent has been provided.

Invoicing and payments

Payment will be processed based on the services entered in the system after the appointment has occurred. The [iRBS How to Guide](#) provides information on how to enter services into the system to ensure your billing and payments are processed efficiently.

- See the [Invoice Checklist](#) for information that must be included
- See [Bupa's Fee Schedule and valid item codes](#).

Using iRBS for the submission of invoices enables Bupa to make payments within 7 days. In the event that you are unable to invoice via iRBS, a manual invoice may be emailed to adfinvoices@bupa.com.au. (Note that payment terms for manual invoices are 30 days).